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APPLICANTS

Avinash Sodani, Portland, OR;

Per H. Hammarlund, Hillsboro, OR;

Samie B. Samaan, Lake Oswego, OR; Kurt D. Kreitzer, Sherwood, OR;

Tom D. Fletcher, Portland, OR;

** CONTINUING DATA *****

P none

** FOREIGN APPLICATIONS *****

P none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY OR	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>P</i>		7	25	4

ADDRESS

23838
 KENYON & KENYON LLP
 1500 K STREET N.W.
 SUITE 700
 WASHINGTON, DC
 20005

TITLE

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FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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